07/14/2006 12:07

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIW 3X	For C	ther Than An	Authorized	d Committe	ee		Office Use Only	у
NAME OF COMMITTEE (in full)		EC MAILING LAE		ample:If typing r the lines	, type			
Baxter Healthcare Po	litical Action Co	ommittee						
	1 1 1 1	1 1 1 1 1	1 1 1					
ADDRESS (number and st	reet) 150	01 K Street, NW						
X Check if differer than previously reported. (ACC)	. Wa	shington				DC	20005]-
2. FEC IDENTIFICATION	ON NUMBER	~	CITY 🛕		;	STATEA	ZIPC	ODE 🛕
C00117838			3. IS THIS REPORT		NEW N) OR		AMENDED A)	
4. TYPE OF REPOF (Choose One) (a) Quarterly Repor April 15 Quarterly F Quarterly F Quarterly F Quarterly F January 31 Quarterly F July 31 Mic Report(Nor Year Only) Termination (TER)	ts: deport(Q1) deport(Q2) deport(Q3) deport(YE) deport(YE) deport(YE)	(d) 30-Day Post -Elect Report for the	Election on		12C)	Se	(12G) in the State	Special (30S)
5. Covering Period	0 6	01 200	6	through	0 6	30	2006	
Type or Print Name of Tre		and to the best of r arah M Gregg	ny knowledge	and belief it is	true, correct	and complete	1.	
Signature of Treasurer	Electronically F	-		hight the next		Pate 07		2 0 0 6
NOTE : Submission of fall Office	se, erroneous, o	or incomplete infor	nation may su	oject the pers	on signing thi	s Report to th	FEC FO	-
Use					1		I	11M 2V

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

Report Covering the Period: From:	01 2006	To: 0 6 3 0 Y Y Y Y Y
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2006		43452.73
(b) Cash on Hand at Begining of Reporting Period	45541.23	
(c) Total Receipts (from Line 19)	8731.19	40319.69
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	54272.42	83772.42
Total Disbursements (from Line 31)	8500.00	38000.00
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45772.42	45772.42
Debts and Obligations owed TO		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
. Debts and Obligations owed BY		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This Committee has qualified as a multicandidat	e committee. (see FEC FORM 1M)	

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

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^Y 2006

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м м 0 6 ^D 3 0

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	8731.19	40319.69
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	8731.19	40319.69
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	8731.19	40319.69
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8731.19	40319.69
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	8731.19	40319.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	8500.00	38000.00
4. Independent Expenditure	0.00	0.00
(use Schedule E)5. Coordinated Expenditures Made by Party	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	0.00	0.00
D. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8500.00	38000.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	8500.00	38000.00
HOITI EITIC 31)	0000.00	00000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	8731.19	40319.69
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	8731.19	40319.69
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 6/31 (check only one)
• • '			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	nittee		
<u>΄</u> Δ.	Full Name (Last, First, Middle Initial) Jennifer Adams			Date of Receipt
	Mailing Address 203 Bridle Path Lane			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29541
	Fox River Grove	IL	60021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Baxter Healthcare Corpora-	Occupation VP I, Sale		Receipt
	tion Receipt For:		e Year-to-Date ▼	-
	Primary General Other (specify) ▼		130.00	Payroll Deduction: (10.00-/Pay Period)
3.	Full Name (Last, First, Middle Initial) Joy A Amundson			Date of Receipt
	Mailing Address 110 W. Onwentsia Road	06 02 7 2006		
	City	State	Zip Code	Transaction ID: 60714.C29547
	Lake Forest	<u>IL</u>	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		585.00 Receipt
	Name of Employer Baxter Healthcare Corpora-	Occupation CVP. Pre	n es BioScience	neceipi
	tion Receipt For:	,	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2515.60	Payroll Deduction: (195.0- 0/Pay Period
	Full Name (Last, First, Middle Initial) Michael Barlev			Date of Receipt
	Mailing Address 61 Telegraph Hill Rd.			0 6 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29540
	Holmdel	NJ	07733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sales Re		Receipt
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	Payroll Deduction: (1.00/-
	Other (specify) ▼		13.00	Pay Period)
SI	JBTOTAL of Receipts This Page (optional)			618.00
т	OTAL This Period (last page this line number or	ıly))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/31
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ny information copied from such Reports and Sta	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Baxter Healthcare Political Action Com	mittee		
A.				Date of Receipt
	Mailing Address 5343 N Lakewood Aven			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29565
	Chicago	IL	60640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Baxter International Inc.	Occupation CVP, Cor		Receipt
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1100.00	Payroll Deduction: (100.0- 0/Pay Period)
	Other (specify)	0 0		O/Pay Period)
В.	Full Name (Last, First, Middle Initial) Armando Bombino			Date of Receipt
	Mailing Address 1795 Ashford Lane			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29539
	Crystal Lake	<u> </u>	60014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer	Occupation	ı	Receipt
	Baxter Healthcáre Corpora- tion	Dir, Oper		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		65.00	Payroll Deduction: (5.00/- Pay Period)
	Cale (openit) V	0 0		,
<u> </u>	Full Name (Last, First, Middle Initial) Pat Brower			Date of Receipt
	Mailing Address 502 Canal			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29526
	Cleveland	MS	38732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			3.00
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion Receipt For:	Mgr I, Dis	e Year-to-Date ▼	
	Primary General	7 tggi ogato		Payroll Deduction: (1.00/-
	Other (specify) ▼		13.00	Pay Period)
	UBTOTAL of Receipts This Page (optional)			318.00
\vdash	ODIOTAL OF HOOGING THIS Fage (optional)			
lτ	OTAL This Period (last page this line number o	nlv)		

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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Baxter Healthcare Political Action Com	mittee		
A.	Full Name (Last, First, Middle Initial) Michael Brown			Date of Receipt
	Mailing Address 531 Lyon Dr			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29562
	Buffalo Grove	IL	60089	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3.00
	Name of Employer Baxter International Inc.	Occupation Dir, Finar		Receipt
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		13.00	Payroll Deduction: (1.00/- Pay Period)
	Other (specify)	0 0	13.00	Pay Period)
В.	Full Name (Last, First, Middle Initial) Glenn Burney			Date of Receipt
٥.	Mailing Address 96 Rock Creek Drive			M M / D D / Y Y Y Y
				06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29524
	Mountain Home	AR	72653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		6.00
	Name of Employer	Occupation	1	Receipt
	Baxter Healthcáre Corpora- tion	Dir, Qual		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	, ,	26.00	Payroll Deduction: (2.00/- Pay Period)
	Cities (Specify)	0 0		T dy T chod
<u> </u>	Full Name (Last, First, Middle Initial) Donna Campagna			Date of Receipt
	Mailing Address 30922 St Andrews Drive	е		0 6 0 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	0 6 0 2 2 0 0 6 Transaction ID: 60714.C29545
	<u>Libertyville</u>	IL	60048	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	
	federal political committee.	C		60.00
	Name of Employer	Occupation	 1	Receipt
	Name of Employer Baxter Healthcare Corpora- tion	VP, Baxte		
	Receipt For:		Year-to-Date ▼	
	Primary General		200.00	Payroll Deduction: (20.00-
	Other (specify) ▼		200.00	/Pay Period)
				69.00
s	UBTOTAL of Receipts This Page (optional))	93.00
_	OTAL This Period (last page this line number o	nnlv)		

TTEMIZED RECEIPTS Design Common	SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 9/31
Any information copied from such Reports and Statements may not be sold or used by any preson for committee of contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Application Principle		· ·		or each category of the	
April (normation copied from such Reports and Statements may not be sold or used by any person for the purpose of solding contributions or for commercial purposes. Other than using the name and address of any pollical committee to solicit communities. NAME OF COMMITTEE (In Full)	••			Detailed Summary Page	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full)	Δr	w information copied from such Benorts and St	atements may	y not he sold or used by any ners	, , , , , , , , , , , , , , , , , , ,
Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Be elevand Cornad Maling Address 113 S Waverly PI City State Zip Code NC 28752 Full Name (Last, First, Middle Initial) Be elevand Cornad Maling Address 113 S Waverly PI City State Zip Code NC 28752 Full Name (Last, First, Middle Initial) Be elevand Cornad Maling Address 113 S Waverly PI City State Zip Code (Augustion String Primary Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary (Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary (Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary Aggregate Year-to-Date Variety Primary (Aggregate Year-to-Date Variety Primary Aggregate Yea	or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. John Cone Mailing Address 153 Pleasant Valley Drive City Marion NC 28792 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ City State Zip Code Sr Principal Engineer For Primary General Other (specify) ▼ City State Zip Code Name of Employer Basker Interfactional Inc. Dirt, Tax Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) External Committee. City State Zip Code II. 60056 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Payroll Deduction: (2.00/-Pay Period) Payroll Deduction: (2.00/-Pay Period) Date of Receipt Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Date of Receipt Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Date of Receipt Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Transaction ID: 60714. C29563 Amount of Each Receipt Inis Period Transaction ID: 60714. C29563 Transaction ID: 6071	\setminus	NAME OF COMMITTEE (In Full)			
A. Join Cone Mailing Address 153 Pleasant Valley Drive City Marion B. Little Corpora- John Corpo		Baxter Healthcare Political Action Com	mittee		
City State Zip Code Marion NC 28752 Marion NC 28752 Name of Employer Baxter Healthcare of contributing federal political committee. Primary General Other (specify) ▼ 26.00 B. Edward Cornad Mailing Address 113 S Waverly PI City State Zip Code IL 60056 FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Primary General Other (specify) ▼ 762.97 City State Zip Code IL 60056 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ 762.97 City State Zip Code IL 60056 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ 762.97 City State Zip Code III 60056 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ 762.97 City State Zip Code III 60056 FEC ID number of contributing federal political committee. C Sarah Creviston Deduction: (59.53-1/Pay Period) Date of Receipt Transaction ID: 60714.C29559 Amount of Each Receipt This Period Payroll Deduction: (59.53-1/Pay Period) Date of Receipt Transaction ID: 60714.C29559 Amount of Each Receipt This Period Receipt Transaction ID: 60714.C29559 Amount of Each Receipt This Period Receipt Transaction ID: 60714.C29559 Amount of Each Receipt This Period Payroll Deduction: (75.68-1/Pay Period) SubstortAL of Receipts This Page (optional)	Α.	,			Date of Receipt
Marion NC 28752		Mailing Address 153 Pleasant Valley Dr	ive		
Receipt Receipt Receipt Receipt Receipt Receipt		City		Zip Code	Transaction ID: 60714.C29533
Name of Employer Baxter Healthcare Corporation Sr Principal Engineer		<u>Marion</u>	NC	28752	Amount of Each Receipt this Period
Bacter Leathcare Corporation Sr Principal Engineer			C		6.00
Receipt For:					Receipt
Primary General Other (specify)					
Full Name (Last, First, Middle Initial) B. Edward Corrad Mailing Address 113 S Waverly PI City State Zip Code IL 60056 FEC ID number of contributing federal political committee. City Primary General Other (specify) ▼ State Zip Code IL 60056 Transaction ID: 60714. C29563 Amount of Each Receipt this Period Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code IT (Sarah Creviston Direction (Sarah Creviston Direction ID: 60714. C29559) Palatine IL 60067 FEC ID number of contributing federal political committee. Name of Employer Baxter Inetriational Inc. Name of Employer Baxter Healthcare Corporation ID: 60714. C29559 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation ID: 60714. C29559 Amount of Each Receipt this Period Feceipt For: Primary General Occupation ID: 60714. C29559 Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Feriod Transaction ID: 60714. C29559 Amount of Each Receipt This Period Feceipt For: Primary General Office (Sarah Creviston ID: 60714. C29559) Amount of Each Receipt This Period For: Primary General Office (Sarah Creviston ID: 60714. C29559) Feriod Transaction ID: 60714. C29559 Feriod T			33 -3		Payroll Deduction: (2.00/-
B. Edward Conrad Mailing Address 113 S Waverly PI City State Zip Code IL 60056 FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Payroll Deduction: (59.53-/Pay Period Full Name (Last, First, Middle Initial) C. Sarah Creviston Mailing Address 717 North Maple Ave. City State Zip Code Dir, Tax Aggregate Year-to-Date ▼ Payroll Deduction: (59.53-/Pay Period Date of Receipt Transaction ID: 60714.C29563 Amount of Each Receipt this Period Feceipt Payroll Deduction: (59.53-/Pay Period Date of Receipt Date of Receipt Transaction ID: 60714.C29563 Amount of Each Receipt Date of Receipt Date of Receipt Transaction ID: 60714.C29563 Amount of Each Receipt Date of Receipt Transaction ID: 60714.C29563 Amount of Each Receipt Transaction ID: 60714.C29563 Payroll Deduction: (75.68-/Pay Period) Payroll Deduction: (75.68-/Pay Period) SubstortAL of Receipts This Page (optional)		Other (specify) ▼	0 0	26.00	Pay Period)
City Mt Prospect EC D number of contributing federal political committee. C	В.				Date of Receipt
Mt Prospect IL 60056 FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Primary General Other (specify) ▼		Mailing Address 113 S Waverly PI			
FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For:		City	State	Zip Code	Transaction ID: 60714.C29563
Name of Employer Baxter Interriational Inc. Dir, Tax		Mt Prospect	IL 60056		Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼			C		
Receipt For: Primary		Name of Employer	Occupation	ı	Receipt
Primary General Other (specify) ▼		-			
Other (specify) ▼ C. Full Name (Last, First, Middle Initial) C. Sarah Creviston Mailing Address 717 North Maple Ave. City State Zip Code Palatine IL 60067 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Substortal of Receipts This Page (optional) Argure (patient) (35.33 Fed. 97 Pay Period Date of Receipt M M M O O D D D O O 2 2 0 0 6 Transaction ID: 60714.C29559 Amount of Each Receipt this Period Receipt Receipt Payroll Deduction: (75.68-/Pay Period) Attributed Payroll Deduction: (75.68-/Pay Period) Attributed Payroll Deduction: (75.68-/Pay Period)			Aggregate	e Year-to-Date ▼	
C. Sarah Creviston Mailing Address 717 North Maple Ave. City State Zip Code Palatine IL 60067 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				762.97	Payroll Deduction: (59.53- /Pay Period)
City State Zip Code Palatine IL 60067 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) State Zip Code Transaction ID: 60714.C29559 Amount of Each Receipt this Period Receipt Transaction ID: 60714.C29559 Amount of Each Receipt this Period Payroll Deduction: (75.68-/Pay Period) 411.63	<u> </u>	,			Date of Receipt
Palatine IL 60067 Amount of Each Receipt this Period 227.04 Receipt Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Palatine IL 60067 Amount of Each Receipt this Period 227.04 Receipt Payroll Deduction: (75.68-/Pay Period) 411.63		Mailing Address 717 North Maple Ave.			
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) PEC ID number of contributing 227.04 Receipt Receipt Payroll Deduction: (75.68-/Pay Period) Payroll Deduction: (75.68-/Pay Period)		City	State	Zip Code	Transaction ID: 60714.C29559
Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Page of Employer Baxter Healthcare Corporation VP, Government Affairs Aggregate Year-to-Date ▼ Payroll Deduction: (75.68-/Pay Period) Payroll Deduction: (75.68-/Pay Period)		Palatine	IL	60067	Amount of Each Receipt this Period
Name of Employer Baxter Healthcare Corporation NP, Government Affairs Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Payroll Deduction: (75.68-/Pay Period) SUBTOTAL of Receipts This Page (optional)			C		
tion Receipt For: Primary Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) VP, Government Allairs Aggregate Year-to-Date ▼ Payroll Deduction: (75.68-/Pay Period) Payroll Deduction: (75.68-/Pay Period)		tion			Receipt
Primary General Other (specify) ▼ 962.24 Payroll Deduction: (75.68-/Pay Period) SUBTOTAL of Receipts This Page (optional) 411.63					\dashv
Other (specify) ▼ 962.24 Taylon Budgetton. (75.66) Pay Period			Aggregate	rear-lu-Dale ▼	Downell Deduction: (75.00
SUBTUTAL of Receipts This Page (optional)				962.24	Pay Period)
	s	UBTOTAL of Receipts This Page (optional)			411.63
				<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	Check only one)				
Ar	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad	ny not be sold or used by any perso	on for the purpose of soliciting contributions				
\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee	dress of any political committee to	SOIGH CONTIDUTIONS HOTH SUCH COMMITTEE.				
Α.	Full Name (Last, First, Middle Initial) Margarita Cruz-casse		Date of Receipt				
	Mailing Address Violeta 153, San Francisco		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O				
	City State San Juan PR	Zip Code 00927	Transaction ID: 60714.C29575				
	FEC ID number of contributing federal political committee.	00927	Amount of Each Receipt this Period 119.94				
	Name of Employer Baxter Healthcare Puerto Rico Dir, Logi	istics	Receipt				
	Receipt For: Primary General Other (specify)	e Year-to-Date ▼ 504.08	Payroll Deduction: (39.98- /Pay Period)				
В.	Full Name (Last, First, Middle Initial) Robert M Davis		Date of Receipt				
	Mailing Address 21515 Hummingbird Court		06 02 7 2006				
	City State Kildeer IL	Zip Code 60047	Transaction ID: 60714.C29566				
	FEC ID number of contributing federal political committee.	00047	Amount of Each Receipt this Period 346.14				
	Name of Employer Baxter International Inc. Occupation CVP, Ch	on nief Financial Officer	Receipt				
	Receipt For: Primary General Other (specify) Aggregat	e Year-to-Date ▼ 947.59	Payroll Deduction: (115.3- 8/Pay Period)				
<u> </u>	Full Name (Last, First, Middle Initial) Gonz lez Chevalier Denisse		Date of Receipt				
	Mailing Address PO Box 363326		06 30 7 2006				
	City State San Juan PR	Zip Code	Transaction ID: 60714.C29702				
	San Juan PR FEC ID number of contributing federal political committee.	00936-326	Amount of Each Receipt this Period 20.00				
	Name of Employer Baxter S. & D. Puerto Rico Occupation Mgr, Re	gion	Receipt				
	Receipt For: Primary General Other (specify)	e Year-to-Date ▼ 20.00	Payroll Deduction: (20.00-/Pay Period)				
s	UBTOTAL of Receipts This Page (optional)		486.08				
Т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/31
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.	ny information copied from such Reports and Sta	tomonto mo	, not be cold or used by any perce	13 14 15 16 17
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	Baxter Healthcare Political Action Comm	nittee		
_	Full Name (Lost First Middle Initial)			
A.	Full Name (Last, First, Middle Initial) Karen Dewey			Date of Receipt
	Mailing Address 92 Spring Valley Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29518
	Mtn Home	AR	72653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		6.00
	Name of Employer	Occupation		Receipt
	Baxter Healthcare Corpora- tion	Planner I		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		26.00	Payroll Deduction: (2.00/-
	Other (specify)	0 0	20.00	Pay Period)
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address Estancias De San Ferna	ındo Calle	7	06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29576
	Carolina	PR	00985	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Baxter S. & D. Puerto Rico	Occupation	n	Receipt
	Baxter S. & D. Puerto Rico	Mgr I, Re	<u> </u>	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	, ,	120.00	Payroll Deduction: (20.00- /Pay Period)
	Other (specify)	0 0	0 0 0 0 0 0 0	/ ay r enou)
_	Full Name (Last, First, Middle Initial) Frederick Dodge			Date of Receipt
C.	Mailing Address 233 Mtn St			M M / D D / Y Y Y Y
	233 Will St			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29527
	Marion	NC	28752	Amount of Each Receipt this Period
	FEC ID number of contributing	C		3.00
	federal political committee.			
	Name of Employer Baxter Healthcare Corpora-	Occupation	n	Receipt
	Baxter Healthcare Corpora- tion	Sr Princi	oal Engineer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		13.00	Payroll Deduction: (1.00/-
	Other (specify)	0 0		Paý Period) `
Г				60.00
S	UBTOTAL of Receipts This Page (optional)		······	69.00
Т.	OTAL This Period (last page this line number or	าly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/31
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Baxter Healthcare Political Action Com	mittee		
Α.	Full Name (Last, First, Middle Initial) Mary Fernald			Date of Receipt
	Mailing Address 36 Wagner Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29544
	Hillsborough	NJ	08844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion Receipt For:	Mgr, Reg	on Year-to-Date ▼	
	Primary General	Aggregate	F Teal-to-Date ▼	Payroll Doduction: (5.00/
	Other (specify) ▼		65.00	Payroll Deduction: (5.00/- Pay Period)
— В.	Full Name (Last, First, Middle Initial) Rodney Foster			Date of Receipt
	Mailing Address 1979 N. Trevino Terrac	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29520
	Vernon Hills	IL 60061		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.00
	Name of Employer Baxter Healthcare Corpora-	Occupation	n ngineering	Receipt
	tion Receipt For:		Year-to-Date V	
	Primary General	33 0	50.00	Payroll Deduction: (4.00/-
	Other (specify) ▼		52.00	Pay Period)
C.	Full Name (Last, First, Middle Initial) Kevin Freeman			Date of Receipt
	Mailing Address 832 Foxmoor Lane			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29543
	<u>Lake Zurich</u>	<u>IL</u>	60047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		159.66
	Name of Employer Baxter Healthcare Corporation Receipt For:		n ance	Receipt
			Year-to-Date ▼	_
	Primary General Other (specify) ▼		580.22	Payroll Deduction: (53.22-/Pay Period)
[e	IIRTOTAL of Receipts This Page (entiage)			186.66
-	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 13/31
		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
		Solding Sulfilliary Lage	13 14 15 16 17
Any information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Baxter Healthcare Political Action Comm	nittee		
/			
Full Name (Last, First, Middle Initial) 4. Elizabeth Fuller			Date of Receipt
Mailing Address 975 Seaboard Ave			M M / D D / Y Y Y Y
Maining / Naciose 9/3 Seabbard Ave			06 02 2006
City	State	Zip Code	Transaction ID: 60714.C29553
Atlanta	GA	30318	Amount of Each Receipt this Period
FEC ID number of contributing			24.33
federal political committee.	C		24.33
Name of Employer	Occupation	2	Receipt
Name of Employer Baxter Healthcare Corpora-		e Government Affairs	
tion Receipt For:		Year-to-Date ▼	
Primary General	33 - 3		Payroll Deduction: (8.11/-
Other (specify) ▼	1	98.01	Pay Period)
Full Name (Last, First, Middle Initial)			
3. James Gatling			Date of Receipt
Mailing Address 3704 Lindsay Ln			06 02 2006
City	State	Zip Code	Transaction ID: 60714.C29525
Crystal Lake	II	60014	Amount of Each Receipt this Period
		00014	
FEC ID number of contributing federal political committee.	C		409.62
			Receipt
Name of Employer Baxter Healthcare Corpora-	Occupation		riccopt
tion		bal Manufacturing Ops	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)	' '	1684.24	Payroll Deduction: (136.5- 4/Pay Period)
Cirici (opcony) 🔻	1 1	1 1 1 1 1 1 1	, with an experience of the control
Full Name (Last, First, Middle Initial)			+
Juan Gonzalez			Date of Receipt
Mailing Address 17842 Rachel Lane			M M / D D / Y Y Y Y
		7.0.1	06 02 2006
City	State II	Zip Code	Transaction ID: 60714.C29535
Orland Park	IL	60467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
rederal political committee.			Descript
Name of Employer Baxter Healthcare Corpora-	Occupation	1	Receipt
tion	Project M	<u> </u>	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	' '	65.00	Payroll Deduction: (5.00/- Pay Period)
Other (specify)	1 1		Fay Fellod)
SUBTOTAL of Receipts This Page (optional)			448.95
ODITION OF THEORIPS THIS FAGE (Optional)		······································	
TOTAL This Period (last page this line number or	nly))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14/31			
	EMIZED RECEIPTS		or each category of the	(check only one)			
•••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Ar	y information copied from such Reports and Sta	itements may	not be sold or used by any person	 			
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	Baxter Healthcare Political Action Comr	nittee					
A.	Full Name (Last, First, Middle Initial) John Greisch			Date of Receipt			
	Mailing Address 2636 Chesapeake Lane			06 02 7 2006			
	City	State	Zip Code	Transaction ID: 60714.C29572			
	Northbrook	IL	60062	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		660.00			
	Name of Employer Baxter International Inc.	Occupation CVP, Pre	n esident - International	Receipt			
	Receipt For:	Aggregate	Year-to-Date V				
	Primary General Other (specify) ▼		2780.00	Payroll Deduction: (220.0- 0/Pay Period)			
— В.	Full Name (Last, First, Middle Initial) Lawrence Guiheen			Date of Receipt			
	Mailing Address 1653 Vista Oaks Way			06 02 2006			
	City	State	Zip Code	Transaction ID: 60714.C29516			
	Westlake Vilage	CA	91361	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		105.00			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation President		Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		455.00	Payroll Deduction: (35.00- /Pay Period)			
<u> </u>	Full Name (Last, First, Middle Initial) Stephen Irby			Date of Receipt			
	Mailing Address 601 Baxter Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 60714.C29519			
	Mtn Home	AR	72653	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		6.00			
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Planne		Receipt			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		26.00	Payroll Deduction: (2.00/- Pay Period)			
s	UBTOTAL of Receipts This Page (optional)			771.00			
T	OTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the	(check only one)			
	LIMIZED RECEIP 13	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Ar or	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee					
Α.	Full Name (Last, First, Middle Initial) James Kamienski		Date of Receipt			
	Mailing Address 6312 N Keating		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State	Zip Code	Transaction ID: 60714.C29528			
	<u>Chicago</u> <u>IL</u>	60646	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		151.41			
	Name of Employer Baxter Healthcare Corporation Occupation VP II, Ma	on anufacturing	Receipt			
	Receipt For: Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	645.85	Payroll Deduction: (50.47- /Pay Period)			
В.	Full Name (Last, First, Middle Initial) Carol Lampe		Date of Receipt			
	Mailing Address 303 Northwind Dr.		06 02 7 2006			
	City State Lake Villa IL	Zip Code	Transaction ID: 60714.C29536			
	FFC ID as well as of a cartaily stine.	60046	Amount of Each Receipt this Period			
	federal political committee.		Receipt 3.00			
	Name of Employer Baxter Healthcare Corporation Occupation Sr Resea	on arch Scientist	1 toosipt			
	Receipt For: Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	13.00	Payroll Deduction: (1.00/- Pay Period)			
<u> </u>	Full Name (Last, First, Middle Initial) Susan R Lichtenstein		Date of Receipt			
	Mailing Address 1257 W Wrightwood Ave		06 02 2006			
	City State	Zip Code	Transaction ID: 60714.C29567			
	Chicago IL	60614	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		567.69			
		eneral Counsel	Receipt			
	Receipt For: Aggregate Primary General	e Year-to-Date ▼	1 B #B # 4400 0			
	Other (specify)	2433.83	Payroll Deduction: (189.2- 3/Pay Period)			
s	UBTOTAL of Receipts This Page (optional)		722.10			
Т	OTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/31
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.	ny information copied from such Reports and Statemer	ata mai	, not be cold or used by ony never	13 14 15 16 17
or	for commercial purposes, other than using the name a	and add	rnot be sold of used by any personal ress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	Baxter Healthcare Political Action Committee	9		
\angle				
Α.	Full Name (Last, First, Middle Initial) Gary Loudermilk			Date of Receipt
Α.	Mailing Address 570 S Creek Rd			M M / D D / Y Y Y Y
	Maining Address 370 S Creek Hu			06 02 2006
	City St	ate	Zip Code	Transaction ID: 60714.C29532
	Nebo Nebo	<u>C</u>	28761	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee	'		6.00
	federal political committee.			3.00
	Name of Employer Occ	upation	1	Receipt
	Baxter Healthcare Corporation Sur	ot, Ma	nufacturing	
	Receipt For: Agg	gregate	Year-to-Date ▼	
	Primary General		26.00	Payroll Deduction: (2.00/-
	Other (specify) ▼	0 0		Pay Period)
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 421 North Wheaton Ave			M M / D D / Y Y Y Y
	011	-1-	7'- O-4-	06 02 2006
	•	ate	Zip Code	Transaction ID: 60714.C29571
			60187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			152.88
				Receipt
		cupation , Tax	1	1.655.pt
	·	<u> </u>	Year-to-Date ▼	
	Primary General	gregate	Teal-to-Date V	Payroll Deduction: (50.96-
	Other (specify) ▼		505.13	/Pay Period)
_	Full Name (Last, First, Middle Initial) Brian W Magerkurth			Data of Receipt
C.	Mailing Address 4218 Third Street Lane NW			Date of Receipt
	42 TO THIRD SHEEL LAIR NVV			06 02 2006
	City St	ate	Zip Code	Transaction ID: 60714.C29548
	<u>Hickory</u> No.	<u>C</u>	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee	<u> </u>		165.78
	federal political committee.			100.70
	Name of Employer Baxter Healthcare Corpora-	upation	1	Receipt
	Baxter Healthcáre Corpora- tion VP	II, Glo	bal Supply Chain	
Receipt For: Aggregat		gregate	Year-to-Date ▼	
	Primary General		598.34	Payroll Deduction: (55.26- /Pay Period)
	Other (specify) ▼	0 0		/ray renou)
Г	I			
s	UBTOTAL of Receipts This Page (optional)		_	324.66
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т	OTAL This Period (last page this line number only)			

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 17/31
•			Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	ly information copied from such Reports and Star for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	Baxter Healthcare Political Action Comm	nittee		
A.	Full Name (Last, First, Middle Initial) Teresita Martinez-santini			Date of Receipt
	Mailing Address A-1 Atenas St Repto. Fla			06 02 4 2006
	City	State	Zip Code	Transaction ID: 60714.C29574
	Bayamon	PR	00959	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		132.93
	Name of Employer Baxter Healthcare Puerto	Occupation Dir, Qual		Receipt
	Rico Receipt For:		Year-to-Date ▼	
	Primary General		400.40	Payroll Deduction: (44.31-/Pay Period)
	Other (specify) ▼		488.43	/Páy Period)`
В.	Full Name (Last, First, Middle Initial) John Martino			Date of Receipt
	Mailing Address 104 Dumont Dr			0 6 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29521
	Morganton	NC	28655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3.00
	Name of Employer Baxter Healthcare Corpora-	Occupation	n	Receipt
	tion	Dir, Qual	•	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼		13.00	Payroll Deduction: (1.00/- Pay Period)
<u> </u>	Full Name (Last, First, Middle Initial) Kevin Mcculloch			Date of Receipt
	Mailing Address 730 Greenwood Avenue			0 6 0 2 2 0 0 6
	City	State	Zip Code	Transaction ID: 60714.C29555
	Wilmette	IL	60091	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		158.64
	Name of Employer Baxter Healthcare Corpora-	Occupation General I	n Manager III	Receipt
			e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	670.16	Payroll Deduction: (52.88-/Pay Period)
S	UBTOTAL of Receipts This Page (optional)			294.57
\vdash	CETAL OF TOOCIPIE THIS T age (optional)			
т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/31
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Δn	y information copied from such Reports and Si	tatements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Baxter Healthcare Political Action Com	ımittee		
Α.	Full Name (Last, First, Middle Initial) Bruce Mcgillivray			Date of Receipt
	Mailing Address 151 Ridge Lane			06 02 4 2006
	City	State	Zip Code	Transaction ID: 60714.C29551
	<u>Lake Forest</u>	<u> L</u>	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		403.86
	Name of Employer Baxter Healthcare Corpora- tion	Occupation CVP. Pre	n esident Renal	Receipt
	Receipt For:		e Year-to-Date ▼	
	Primary General		1471.58	Payroll Deduction: (134.6- 2/Pay Period)
	Other (specify)	0 0	1471.30	2/Pay Period)
В.	Full Name (Last, First, Middle Initial) Donald Mcpeters			Date of Receipt
	Mailing Address 119 North Hills Drive			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29531
	Marion	NC	28752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3.00
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion Receipt For:		Manufacturing • Year-to-Date ▼	
	Primary General	riggrogato		Payroll Deduction: (1.00/-
	Other (specify) ▼	0 0	13.00	Pay Period)
<u>С</u> .	Full Name (Last, First, Middle Initial) Victor Miller			Date of Receipt
	Mailing Address 230 9th Street			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29554
	Wilmette	IL	60091	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		11.55
	Name of Employer Baxter Healthcare Corpora-		ı	Receipt
	tion tion	Dir, Mark		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		50.05	Payroll Deduction: (3.85/- Pay Period)
[e	IRTOTAL of Receipts This Page (optional)			418.41
٦	UBTOTAL of Receipts This Page (optional)			
Т т	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/31	
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	rnot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Baxter Healthcare Political Action Commi	ittee		
\angle				
	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	Frank Monteleone			Date of Receipt
	Mailing Address 4620 Forest Edge Lane			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29557
	Long Grove	IL	60047	Amount of Each Receipt this Period
	FEC ID number of contributing			196.38
	federal political committee.	C		190.30
	Name of Employer	Occupation	า	Receipt
	Baxter Healthcáre Corpora-	VP, Baxte		
	tion L Receipt For:		Year-to-Date ▼	7
	Primary General		007.70	Payroll Deduction: (65.46-
	Other (specify) ▼		837.72	/Pay Period)
В.	Full Name (Last, First, Middle Initial) Barbara Morris			Date of Receipt
٠.	Mailing Address 924 N. Saratoga Dr.			M M / D D / Y Y Y Y
	OZ 114. Garatoga Dr.			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29534
	Palatine	IL	60074	Amount of Each Receipt this Period
	FEC ID number of contributing	С		30.00
	federal political committee.	0		
	Name of Employer Baxter Healthcare Corpora-	Occupation	1	Receipt
	tion Baxter Healthcare Corpora-	VP II, HF	}	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, , , , , , , , , , , , , , , , , , ,	130.00	Payroll Deduction: (10.00-/Pay Period)
	Other (specify)		1 1 1 1 1 1 1	/ray renou)
_	Full Name (Last, First, Middle Initial)			
C.	Timothy Murphy			Date of Receipt
	Mailing Address 14601 N Somerset Circle			M M / D D / Y Y Y Y
	Cit.	01-1-	Zip Code	06 02 2006
	City Libertyville	State IL	2ip Code 60048	Transaction ID: 60714.C29556
	•		00040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		67.50
				Receipt
	Name of Employer Baxter Healthcare Corpora-	Occupation		1.000.pt
	tion Receipt For:		eral Counsel Year-to-Date	-
	Primary General	, iggi ogale	, isai to bate ¥	Payroll Deduction: (22.50-
	Other (specify) ▼		278.17	/Pay Period)
				202.02
S	UBTOTAL of Receipts This Page (optional)	<u></u>	······································	293.88
Γ				
T	OTAL This Period (last page this line number only	y)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 20 / 31
-			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
An or	ny information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Baxter Healthcare Political Action Comm	nittee		
۹.	Full Name (Last, First, Middle Initial) Peter Omalley			Date of Receipt
	Mailing Address 563 Greenway Drive			06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29560
	<u>Lake Forest</u>	IL	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		135.00
	Name of Employer	Occupation	 n	Receipt
	Name of Employer Baxter Healthcare Corpora- tion	VP/GM II		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		585.00	Payroll Deduction: (45.00-
	Other (specify)	0 0	383.00	/Páy Period)`
3.	Full Name (Last, First, Middle Initial) Robert L Parkinson			Date of Receipt
	Mailing Address 1332 Edgewood Lane			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29570
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		461.54
	Name of Employer Baxter International Inc.	Occupation Chairman		Receipt
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼		4984.62	Payroll Deduction: (461.5- 4/Pay Period)
	Carlot (Specify) •	0 0		,
Э.	Full Name (Last, First, Middle Initial) Robert L Parkinson			Date of Receipt
	Mailing Address 1332 Edgewood Lane			0 6 1 6 2 0 0 6
	City	State	Zip Code	Transaction ID: 60714.C29633
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.38
	Name of Employer Baxter International Inc.	Occupation Chairman		Receipt
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	5000.00	Payroll Deduction: (15.38- /Pay Period)
s	UBTOTAL of Receipts This Page (optional)			611.92
_			······································	
T	OTAL This Period (last page this line number or	nly))	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21	/ 31			
	EMIZED RECEIPTS		or each category of the	(check only one)	_		
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12			
Δr	ny information copied from such Reports and State	ments may	y not be sold or used by any perso				
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee	ж.		
\setminus	NAME OF COMMITTEE (In Full)						
	Baxter Healthcare Political Action Comm	ittee					
	Full Name (Last, First, Middle Initial)						
Α.	Shannon Penberthy			Date of Receipt			
	Mailing Address 3214 Porter Street, NW			06 13 200			
	City	State	Zip Code	Transaction ID: 60619.C29387	7		
	Washington	DC	20008	Amount of Each Receipt this Perio			
	FEC ID number of contributing federal political committee.	C		1020	0.00		
	Name of Employer	Occupation	1	Receipt			
	Provide Form	A	Versite Del 💻	_			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼				
	Other (specify)		1020.00				
				1			
В.	Full Name (Last, First, Middle Initial) Shannon W. Penberthy			Date of Receipt			
	Mailing Address 3214 Porter Street, NW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 60714.C29675	5		
	Washington	DC	20008	Amount of Each Receipt this Period	od		
	FEC ID number of contributing federal political committee.	C			0.00		
	Name of Employer Baxter Healthcare Corpora-	Occupation	า	Receipt			
	tion		Aff & Public Policy				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		80.00	Payroll Deduction: (80.00- /Pay Period)			
	Curior (openity)	0 0		, ay consul			
<u> </u>	Full Name (Last, First, Middle Initial) Carla Pittman			Date of Receipt			
	Mailing Address 5720 Shenandoah Avenu	е		M M / D D / Y Y Y	Y		
				06 02 200	0 6		
	City	State	Zip Code	Transaction ID: 60714.C29552			
	Los Angeles	CA	90056	Amount of Each Receipt this Period	od		
	FEC ID number of contributing federal political committee.	C		155	5.25		
				Receipt			
	Name of Employer Baxter Healthcare Corpora-	Occupation		rieceipi			
	tion Receipt For:	Sr Couns	sel e Year-to-Date ▼	-			
	Primary General	Aggregate	: Teal-to-Date V	Payroll Deduction: (51.75-			
	Other (specify)	١	662.55	/Pay Period)			
_							
	LIPTOTAL of Descints This Dame (antique)		_	1255	5.25		
S	UBTOTAL of Receipts This Page (optional)		······				
Т.	TOTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	Check only one
Δ	ny information copied from such Reports and Statements m	,	13 14 15 16 17
or	for commercial purposes, other than using the name and a	ddress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee		
Α.	Full Name (Last, First, Middle Initial) Virginia Pringle		Date of Receipt
	Mailing Address 341 3rd Street West		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Transaction ID: 60714.C29538
	Tierra Verde FL	33715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		86.19
	Name of Employer Baxter Healthcare Corporation Occupat Mgr II,	ion Operations	Receipt
		ate Year-to-Date ▼	7
	Primary General Other (specify) ▼	366.05	Payroll Deduction: (28.73-/Pay Period)
В.	Full Name (Last, First, Middle Initial) Neervalur Raghavan		Date of Receipt
	Mailing Address 2327 Castilian		06 02 7 2006
	City State	Zip Code	Transaction ID: 60714.C29537
	Northbrook IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		15.00 Receipt
	Name of Employer Baxter Healthcare Corporation Occupat VP I, R	ion esearch	Песері
		ate Year-to-Date ▼	
	Primary General Other (specify) ▼	65.00	Payroll Deduction: (5.00/- Pay Period)
<u>С</u> .	Full Name (Last, First, Middle Initial) Elizabeth Redd		Date of Receipt
	Mailing Address 604 South Leflore		06 02 7 2006
	City State	Zip Code	Transaction ID: 60714.C29523
	<u>Cleveland</u> MS	38732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		3.00
	tion	ontroller I	Receipt
		ate Year-to-Date ▼	
	Primary General Other (specify) ▼	13.00	Payroll Deduction: (1.00/- Pay Period)
s	UBTOTAL of Receipts This Page (optional)		104.19
_	OTAL This Period (last page this line number only)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23/31				
	EMIZED RECEIPTS		or each category of the	(check only one)			
••	LIMIZED NEOLII 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Δr	ny information copied from such Reports and Sta	tomente may	, not be sold or used by any perso				
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
$ \rangle$	Baxter Healthcare Political Action Comm	nittee					
\angle							
Α.	Full Name (Last, First, Middle Initial) David Rohrbach			Date of Receipt			
۸.	Mailing Address 10 Hawkes Court			M M / D D / Y Y Y Y			
	- To Hawkoo Court			06 02 2006			
	City	State	Zip Code	Transaction ID: 60714.C29550			
	Bridgewater	NJ	08807	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		30.00			
	federal political committee.						
	Name of Employer	Occupation	n	Receipt			
	Baxter Healthcare Corpora- tion	VP I, Qua	ality				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General	, , ,	110.00	Payroll Deduction: (10.00-/Pay Period)			
	☐ Other (specify) ▼	-		/Fay Feriod)			
	Full Name (Last, First, Middle Initial)						
В.	Harold Sargent			Date of Receipt			
	Mailing Address 1151 Woodview Drive			M M / D D / Y Y Y Y			
	Oth.	Ctata	7in Ondo	06 02 2006			
	City Green Oaks	State IL	Zip Code	Transaction ID: 60714.C29517			
		IL.	60048	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		6.00			
				Receipt			
	Name of Employer Baxter Healthcare Corpora-	Occupation		1.655.61			
	tion	Sr Dir, Ro	e Year-to-Date 🔻	_			
	Primary General	Aggregate	r rear-to-date V	Payroll Doduction: (2.00/			
	Other (specify)		26.00	Payroll Deduction: (2.00/- Pay Period)			
_	Full Name (Last, First, Middle Initial)			5. (5			
C.	David P Scharf Mailing Address 931 Oak Street			Date of Receipt			
	Mailing Address 931 Oak Street			06 02 2006			
	City	State	Zip Code	Transaction ID: 60714.C29568			
	Winnetka	IL	60093	Amount of Each Receipt this Period			
	FEC ID number of contributing			132.99			
	federal political committee.	C		152.33			
	Name of Employer Baxter International Inc.	Occupation	 n	Receipt			
	Baxter International Inc.		rporate Secretary				
	Receipt For:		Year-to-Date ▼				
	Primary General	· · ·	424.84	Payroll Deduction: (44.33-			
	☐ Other (specify) ▼		727.04	Páy Period)`			
٩	UBTOTAL of Receipts This Page (optional)			168.99			
\vdash							
Т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24/31
ITEMIZED RECEIPTS			or each category of the	(check only one)
••	EMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ny information copied from such Reports and Stat	ements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Baxter Healthcare Political Action Comm	ittee		
Α.	Full Name (Last, First, Middle Initial) Michael Schiffer			Date of Receipt
	Mailing Address 33741 Shackleton Isle			06 02 7 2006
	City	State	Zip Code	Transaction ID: 60714.C29546
	Monarch Beach	CA	92629	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		209.25
	Name of Employer Baxter Healthcare Corpora-	Occupation	n eneral Counsel	Receipt
	tion Receipt For:		Year-to-Date ▼	
	Primary General	00 0		Payroll Deduction: (69.75-
	Other (specify)	0 0	892.59	/Páy Period)
В.	Full Name (Last, First, Middle Initial) Victor Schmitt			Date of Receipt
	Mailing Address 699 Bluff Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 60714.C29542
	Lake Bluff	<u>IL</u>	60044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.50
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt
	tion		nture Management	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		500.50	Payroll Deduction: (38.50- /Pay Period)
<u> </u>	Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
	Mailing Address 1621 Mission Hills Rd Ur	nit 211		M M / D D / Y Y Y Y
				06 02 2006
	City	State	Zip Code	Transaction ID: 60714.C29515
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.06
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Mfg	n g Strategic Planning	Receipt
	Receipt For: Ag		Year-to-Date ▼	
	Primary General Other (specify) ▼		534.32	Payroll Deduction: (51.02- /Pay Period)
	UBTOTAL of Receipts This Page (optional)			477.81
\vdash	ODIOTAL OF RECEIPES THIS Fage (optional)			
lτ	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25/31									
	EMIZED RECEIPTS		or each category of the	(check only one)									
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17									
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso										
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.									
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
/	Baxter Healthcare Political Action Comm	ittee											
۹.	Full Name (Last, First, Middle Initial) Deborah Spak			Date of Receipt									
	Mailing Address 1555 Stratford			0 6 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	City	State	Zip Code	Transaction ID: 60714.C29569									
	Deerfield	<u>IL</u>	60015	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		34.95									
	Name of Employer Baxter International Inc.	Occupation		Receipt									
	Receipt For:		munications Year-to-Date ▼	-									
	Primary General	Aggregate	Total to Bate V	Payroll Deduction: (11.65-									
	Other (specify) ▼	0 0	148.75	/Pay Period)									
3.	Full Name (Last, First, Middle Initial) Edward Sudlow			Date of Receipt									
	Mailing Address 2406 N Hickory			06 02 7 2006									
	City	State	Zip Code	Transaction ID: 60714.C29514									
	Arlington Heights	IL	60004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		6.00 Receipt									
	Name of Employer Baxter Healthcare Corpora-	Occupation Mar II. Su	n upply Chain	neceipi									
	tion Receipt For:	•	Year-to-Date ▼										
	Primary General Other (specify) ▼	· ·	26.00	Payroll Deduction: (2.00/- Pay Period)									
		0 0	0 0 0 0 0 0 0	,									
Э.	Full Name (Last, First, Middle Initial) Donald Sullivan			Date of Receipt									
	Mailing Address 910 W Cypress Drive			06 02 7 2006									
	City	State	Zip Code	Transaction ID: 60714.C29561									
	Arlington Heights	<u>IL</u>	60005	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		120.00									
	Name of Employer Baxter International Inc.	Occupation VP, Risk	n Management	Receipt									
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼		520.00	Payroll Deduction: (40.00- /Pay Period)									
s	UBTOTAL of Receipts This Page (optional)			160.95									
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T	OTAL This Period (last page this line number on	ly)											

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26/31								
	EMIZED RECEIPTS		or each category of the	(check only one)								
••	EMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 15 16 17								
Δ	ry information copied from such Reports and Stat	omonte may	rot he cold or used by any perce									
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.								
\setminus	NAME OF COMMITTEE (In Full)											
	Baxter Healthcare Political Action Comm	ittee										
A.	Full Name (Last, First, Middle Initial) Andrew Thorrens			Date of Receipt								
	Mailing Address 1835 North Hoyne			06 02 2006								
	City	State	Zip Code	Transaction ID: 60714.C29564								
	Chicago	IL	60647	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		6.00								
	Name of Employer Baxter International Inc.	Occupation Dir, Payn	n nent Planning	Receipt								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		26.00	Payroll Deduction: (2.00/- Pay Period)								
	Other (specify) ▼	0 0	20.00	Pay Period)								
В.	Full Name (Last, First, Middle Initial) Joel Tune			Date of Receipt								
	Mailing Address 1365 Vos Court			06 02 YYYY 2006								
	City	State	Zip Code	Transaction ID: 60714.C29529								
	Antioch	IL	60002	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		120.00								
				Receipt								
	Name of Employer Baxter Healthcare Corpora-	Occupation		T toosipt								
	tion Receipt For:		Manager II Year-to-Date ▼									
	Primary General	Aggregate	Flear-to-Date V	Payroll Deduction: (40.00-								
	Other (specify) ▼		520.00	/Pay Period)								
<u> </u>	Full Name (Last, First, Middle Initial) James Utts			Date of Receipt								
	Mailing Address 441 thorne lane			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O								
	City	State	Zip Code	Transaction ID: 60714.C29573								
	Lake Forest	IL	60045	Amount of Each Receipt this Period								
	FEC ID number of contributing											
	federal political committee.	C		115.38								
	Name of Employer Baxter World Trade Corpor-	Occupation		Receipt								
	ation		esident Europe									
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General	, ,	499.98	Payroll Deduction: (38.46- /Pay Period)								
	Other (specify) ▼			, ay renou								
[s	UBTOTAL of Receipts This Page (optional)			241.38								
\vdash	CETTE OF TOOCHES THIS LAYE (Optional)											
lτ	OTAL This Period (last page this line number on	lv)										

S	CHEDULE A (FEC Form 3X)		Lie a consulta a chardula (a)	FOR LINE NUMBER: PAGE 27/31									
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)									
•	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12									
_				13 14 15 16 17									
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.									
$\overline{}$	NAME OF COMMITTEE (In Full)												
\rangle	Baxter Healthcare Political Action Comm	nittee											
۹.	Full Name (Last, First, Middle Initial) Onelia Vera-littrell			Date of Receipt									
	Mailing Address 619 Oleander Drive			06 02 7 2006									
	City	State	Zip Code	Transaction ID: 60714.C29558									
	<u>Hallandale</u>	FL	33009	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		230.76									
	Name of Employer Baxter Healthcare Corpora-	Occupation Asst Gen	n neral Counsel	Receipt									
	tion Receipt For:		e Year-to-Date ▼										
	Primary General			Payroll Deduction: (76.92-									
	Other (specify)		974.44	/Pay Period)									
3.	Full Name (Last, First, Middle Initial) Kenneth R Webb			Date of Receipt									
	Mailing Address 31385 W. Somerset Circ	cle		06 02 7 2006									
	City	State	Zip Code	Transaction ID: 60714.C29549									
	Green Oaks	IL	60048	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		30.00 Receipt									
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Cust	n omer Svc & E-Commerce	Песері									
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General Other (specify) ▼		100.00	Payroll Deduction: (10.00- /Pay Period)									
 C.	Full Name (Last, First, Middle Initial) Clara Williams			Date of Receipt									
	Mailing Address 36 3rd St			0 6 D D D D D D D D D D D D D D D D D D									
	City	State	Zip Code	Transaction ID: 60714.C29522									
	Cleveland	MS	38732	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		3.00									
	Name of Employer Baxter Healthcare Corpora-	Occupation		Receipt									
	tion	Quality A											
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼										
	Other (specify)		13.00	Payroll Deduction: (1.00/- Pay Period)									
s	UBTOTAL of Receipts This Page (optional)			263.76									
			•										
T	OTAL This Period (last page this line number or	nly)	>										

FOR LINE NUMBER: PAGE 28/31 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) A. Donna Williams Date of Receipt Mailing Address 1886 Bowling Green 06 02 2006 City State Zip Code **Transaction ID:** 60714.C29530 Lake Forest IL 60045 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Receipt Name of Employer Baxter Healthcare Corpora-Occupation VP I, Marketing tion Receipt For: Aggregate Year-to-Date ▼ Primary General Payroll Deduction: (5.00/-Pay Period) 65.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	15.00
TOTAL This Period (last page this line number only)	•	8731.19

SCIEDOLE B (I LCI OIIII 5X)	Use seperate schedule(s)	(check or	E NUMBER nlv one)	iE 29/3	<u>29 / 31</u>		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	<u> </u>	X 23 [24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							3
NAME OF COMMITTEE (In Full)	e and address of any political co	ininitiee to s	Olicit Corttrib	utions no	III SUCII CC	mmuee	
Baxter Healthcare Political Action Committ	ee						
Full Name (Last, First, Middle Initial)					60714.E	707	
Conrad Burns				Disburse		YY	Υ
Mailing Address 208 N Montana Ave			06	[/] 2	8	ž 0 Ŏ 6	
City Helena	State Zip Code MT 59601-3837		Amount	of Each I	Disbursen	nent this P	eriod
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Full Name (Last, First, Middle Initial) 3. Anna Eshoo For Congress				ction ID: (Disburse	60714.E	710	
			M M	/ D2		ž 0 0 6	Y
Mailing Address 555 Capitol Mall			0 0			2000	
City Sacramento	State Zip Code CA 95814-4602		Amount	of Each I	Disbursen	nent this P	eriod
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Full Name (Last, First, Middle Initial) Mark Foley				ction ID: (Disburse	60714.E ment	704	
Mailing Address 2099 Penn Ave NW Suit	850		06	/ D 1	5 / Y	ž 0 0 6	Y
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or 1	for commercial purposes, other than using the nam	e and address of any politic	cai comi	mittee to s	SOIICIL	CONTRIDE	Juons iro	om such	COM	nittee			
\rangle	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commit	too											
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	Full Name (Last, First, Middle Initial)				Т	ransac	tion ID:	60714.	E70	6			
١.	Melissa Hart						Disburse				1/		
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3.	Kirk for Congress				- 1		Disburse		_,	O			
	Mailing Address 28 Green Bay Rd				- [0 ^M 6 ^M	/ D	D /	Y Ž	0 0 6	Υ		
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Э.	Joseph Pitts						Disburse						
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\rangle	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	Committe	ee														
۹.	Full Name (Last, First, Middle Initial) Whitfield for Congress								Date o		isburse	eme	714.E		5 0 0 6	Y	
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